

**Non-sewage Waste Transfer Program**

Transfer Application Form

*Submit this form for each waste stream you are proposing to transfer and a Storage Capacity and Nutrient Management Form for each proposed recipient farm to **AGR.WQpermits@vermont.gov**.*

**A. Applicant and Contact Information**

Business Name: \_\_\_\_\_ Primary Contact: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Facility Name: \_\_\_\_\_ Facility E911 Address: \_\_\_\_\_

Phone Number of Contact: \_\_\_\_\_ Email of Contact: \_\_\_\_\_

**B. Description of Non-sewage Waste**

1. Non-sewage waste type and description: \_\_\_\_\_

\_\_\_\_\_

2. Total proposed annual waste transfer to recipient farms: \_\_\_\_\_  gallons  tons

3. List all chemicals (cleaning agents, polymers, coagulants, etc.) that may be present in the waste, recommended usage rates, and daily usage amounts: \_\_\_\_\_

\_\_\_\_\_

**C. Proposed Recipient Farms** (If five or more farms are proposed, submit an [Excel file](#))

Farm/Operation Name (must match Storage Capacity and Nutrient Management Form)	Structure for Deposit	Proposed Annual Transfer Volume
	<input type="checkbox"/> Manure Pit <input type="checkbox"/> Digester	<input type="checkbox"/> gallons <input type="checkbox"/> tons
	<input type="checkbox"/> Manure Pit <input type="checkbox"/> Digester	<input type="checkbox"/> gallons <input type="checkbox"/> tons
	<input type="checkbox"/> Manure Pit <input type="checkbox"/> Digester	<input type="checkbox"/> gallons <input type="checkbox"/> tons
	<input type="checkbox"/> Manure Pit <input type="checkbox"/> Digester	<input type="checkbox"/> gallons <input type="checkbox"/> tons

